

998105

NPIC PROJECT NO.

CLASSIFICATION

RECEIPT OCB/OS

DISSEMINATED OCB/OS

SUPPORT/SERVICE REQUIREMENT

(The following info is required when rqmts are levied by external organizations)

OFFICE _____ DATE OF RQMT _____ CONTROL NO. _____
NPIC DIV/DETACH PROCESSING RQMT _____ PROJ OFF _____ PHONE _____
SUPPORT REQUESTED OF _____ PRIORITY _____ DATE REQUIRED _____

(The following info is required when rqmts are levied for internal support)

DIV/STAFF **P&DS** DATE OF RQMT **30 Dec 64** CONTROL NO. _____
STATOTHR SUPPORT REQUESTED OF **P&DS** PROJ OFF **[REDACTED]** PHONE **3435**
PRIORITY _____ DATE REQUIRED _____

1. BACKGROUND INFORMATION:

- The work requested is in support of a departmental: ☐ Photo interpretation proj.;
☐ Non-photo interpretation project. It will result in: ☐ Hard copy report;
☐ Informal report (memo); ☐ Basic service only.

Project Description: **Image Restoration Study**

2. SPECIFIC SUPPORT/SERVICE REQUESTED: Support from NPIC will probably consist of:

- ☐ Photographic; ☐ Reproduction; ☐ Mensuration; ☐ Graphics; ☐ ADP; ☐ Editing;
☐ Other (explain below) -- (Include statement as to estimated amount of work required of support component(s); i.e., number of contact prints, enlargements, boards, etc.)

Study to determine the feasibility of using optical data processing techniques**to compensate for degradations introduced by the low pass frequency nature of an optical system.**

3. URGENCY JUSTIFICATION: (If immediate support is required a statement of justification must be made on this form.)

DATE OF COMPLETION

CLASSIFICATION

NPIC FM 218 (4-64)

JAN 10 10 07 AM '65

99810-0
NPIC PROJECT NO.Unclassified
CLASSIFICATION

JAN 9 10 24 AM '65

RECEIPT OCB/OS

SUPPORT/SERVICE REQUIREMENT

DISSEMINATED OCB/OS

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OFFICE _____ DATE OF RQMT _____ CONTROL NO. _____

NPIC DIV/DETACH PROCESSING RQMT _____ PROJ OFF _____ PHONE _____

SUPPORT REQUESTED OF _____ PRIORITY _____ DATE REQUIRED _____

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DIV/STAFF _____ P&DS _____ DATE OF RQMT 30 Dec 64 _____ CONTROL NO. _____

SUPPORT REQUESTED OF _____ P&DS _____ PROJ OFF [REDACTED] PHONE 3435

STATOTHR
PRIORITY _____ DATE REQUIRED _____

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STATOTHR

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